



# STATE OF ARIZONA

## OFFICE OF THE ATTORNEY GENERAL

### REQUEST FOR QUOTATIONS

**REQUEST FOR QUOTATION NUMBER: AG08-0007**

**DESCRIPTION: Hewlett-Packard Printer Parts**

**QUOTATION DUE DATE AND TIME: September 18, 2007, at 3:00 p.m. Arizona Local Time.**

**OFFER SHOULD BE FAXED TO:** Office of the Attorney General, Procurement Unit, (602) 542-8079. Offers may be mailed or delivered to the Office of the Attorney General, Attention: Procurement Unit, 1275 West Washington Street, Phoenix, AZ 85007.

**Request for Quotation (RFQ) available in MS Word:** A copy of this Solicitation is available in MS Word by sending an e-mail to [sarah.bean@azag.gov](mailto:sarah.bean@azag.gov). The Solicitation on file in the Office of the Attorney General Procurement Office shall have precedence over any differing documents. Changes to this solicitation shall be without effect unless proposed in accordance with the Uniform and Special Instruction Sections of this Solicitation and specifically accepted by the Arizona Office of the Attorney General.

**Small Business:** In accordance with A.R.S. §41-2535, this solicitation is restricted to small business. A "small business" is one that, including its affiliates, is independently owned and operated, is not dominant in the type of business it conducts, and which employs fewer than 100 full time employees or which has gross receipts of less than \$4 million in its last fiscal year. This procurement cannot exceed the aggregate dollar amount of fifty thousand dollars.

**General:** In accordance with A.R.S. §Title 41, Chapter 23, A.A.C. R2-7-336, quotations for the materials or services specified will be received by the Office of the Attorney General, at the above specified location, until the time and date cited. All quotations should be completed in ink or typewritten and returned via facsimile to (602) 542-8079. Additional instructions for preparing a quotation are provided in the Special Instructions to Offerors.

**OFFERORS ARE STRONGLY ENCOURAGED TO CAREFULLY READ THE ENTIRE REQUEST FOR QUOTATIONS.**

Solicitation Contact Person:

Sarah Bean

Contracts Management Specialist

Phone: (602) 364-2534

Fax: (602) 542-8079

E-Mail: [sarah.bean@azag.gov](mailto:sarah.bean@azag.gov)

## **SCOPE OF WORK**

AG08-0007

### **1. Background**

The Arizona Office of the Attorney General (AGO) has a large quantity and variety of Hewlett-Packard (HP) laser jet printers. The AGO Information Services Section maintains the printers. This contract is to secure a reliable source to provide Original Equipment Manufacturer (OEM) HP parts for these HP printers. The AGO estimates the total value of this contract to be approximately \$15,000.00 of gross revenue per year.

### **2. Printer Parts**

All printer parts shall be genuine OEM HP parts. Parts shall be new. It is recognized and acceptable that some parts include reusable cores that can be remanufactured. All remanufactured parts that include reusable cores shall meet all HP standards for OEM parts. Contractor shall specify at the time of quoting that the part is either "new" or "remanufactured", and that the price includes a reusable core that must be returned.

### **3. Order Process**

Parts will be ordered via telephone or e-mail. The contractor shall provide order services for both these mediums. The Contractor shall supply general support to identify part numbers and ensure the correct part is ordered based upon part description, printer model, and part number (e.g. Maintenance Kit for HP LJ8150N part #C3914-69007). The Contractor shall provide a quote for the specified parts when requested as well as provide suggestions for other options that may be available to allow the AGO to make an intelligent business decision.

### **4. Additional Services**

Contractor shall expedite delivery when requested. The Contractor may charge the additional shipping costs for this expedited delivery. The AGO will ship reusable cores back to vendor via United Parcel Service standard 5-day ground service within 20 days of receipt of ordered parts.

### **5. Specifications**

Packaging: Industry standard

Shipping: FOB Destination

Normal Delivery: Within (3) day After Receipt of Order.

Expedited Delivery: Next Business Day

Delivery Location:

Arizona Office of the Attorney General  
Information Services Section - Basement  
15 South 15<sup>th</sup> Avenue  
Phoenix, Arizona 85007

Billing: Reference Purchase Order number on invoice

Arizona Office of the Attorney General  
Accounts Payable  
1275 West Washington Street  
Phoenix, Arizona 85007

## SPECIAL TERMS AND CONDITIONS

AG08-0007

### 1. Contract

- 1.1 Authority to Contract: This Contract is issued in accordance with ARS §41-2535 for the Office of the Attorney General.
- 1.2 Contract Type: Firm Fixed Cost.
- 1.3 Term of Contract: The term of the Contract shall commence on the date of award and shall continue for up to one year, unless terminated, canceled or extended as otherwise provided herein. This contract may be extended for an additional 24 months by mutual written contract amendment.
- 1.4 Documents Incorporated by Reference: The State of Arizona's Uniform Instructions to Offerors (Rev 7.1) and Uniform Terms and Conditions (Rev 7) are a part of this document as if fully set forth herein. Copies of these documents are available at <http://www.azspo.az.gov/PoliciesDocuments/index.htm> or by calling Jerry Connolly, Office of the Attorney General at 602-542-8030.
- 1.5 Changes: AGO reserves the right to add or delete materials and make other changes within the general scope of work as may be deemed necessary to best serve the interests of the State.
- 1.6 Non-Exclusive Contract: AGO has the right to procure the services listed herein from Contractors other than those awarded Contracts pursuant to this Solicitation when necessary to meet the requirements of AGO.
- 1.7 Removal of Contractor's Employees: The Contractor agrees to utilize only experienced, responsible and capable people in the performance of this Contract. AGO may require that the Contractor remove from an assignment employees who endanger persons or property or whose continued employment under this Contract is inconsistent with the interests of AGO.
- 1.8 Ownership of Materials: All materials, documents, deliverables and/or other products of the Contract (including but not limited to e.g., work plans, reports, etc.) shall be the sole, absolute and exclusive property of AGO, free from any claim or retention of right on the part of the Contractor, its agents, Subcontractors, officers or employees.
- 1.9 Disability Access: Unless specifically authorized in the Contract, any electronic or information technology offered to the State of Arizona under this contract shall comply with A.R.S. § 41-2531 and § 41-2532 and Section 508 of the Rehabilitation Act of 1973, which requires that employees and members of the public shall have access to and use of information technology that is comparable to the access and use by employees and members of the public who are not individuals with disabilities.

### 2. Contractor Responsibilities

- 2.1 Key Personnel: It is essential that the Contractor provide an adequate staff of experienced personnel, capable of and devoted to the successful accomplishment of work to be performed under this Contract. The Contractor must assign specific individuals to key positions. The Contractor shall notify the AGO of staffing changes that directly affect the AGO or the order process. Contractor shall not charge the AGO for any costs associated with removing or replacing Key Personnel who are performing work under this Contract.
- 2.2 Availability of Contractor: The Contractor shall be available immediately upon receipt of the Notice to Proceed and remain available to AGO throughout the period of performance as stated in the Contract.

### 3. Offshore Performance of Work Prohibited

Due to security and identity protection concerns, all services under this contract shall be performed within the borders of the United States. All storage and processing of information shall be performed within the borders of the United States. This provision applies to work performed by subcontractors at all tiers.

## SPECIAL TERMS AND CONDITIONS

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#### 4. Pricing

Pricing for the work described shall be submitted on a firm fixed cost all-inclusive basis. The firm fixed cost shall contain the labor rate, labor benefits, payroll burden, insurance, workman's compensation, all taxes, profit, overhead, general and administrative expenses, fees, travel expenses and all other related charges. A price reduction adjustment may be offered at any time during the term of the Contract and shall become effective upon notice.

#### 5. Invoicing

Invoices shall include the Contract Number and be submitted per the pricing schedule. AGO will process the approved claim for payment in accordance with the standard operating procedures of the State of Arizona.

#### 7. Federal Immigration Laws, Compliance by State Contractors

By entering into the contract, the Contractor warrants compliance with the Federal Immigration and Nationality Act (FINA) and all other Federal Immigration laws and regulations related to the immigration status of its employees. The Contractor shall obtain statements from its subcontractors certifying compliance and shall furnish the statements to the Procurement Officer upon request. These warranties shall remain in effect through the term of the contract. The contractor and its subcontractors shall also maintain Employment Eligibility Verification forms (1-9) as required by the U.S. Department of Labor's Immigration and Control Act, for all employees performing work under the Contract. 1-9 forms are available for download at USCIS.GOV.

The State may request verification of compliance for any Contractor or subcontractor performing work under the Contract. Should the State suspect find or that the Contractor or any of its subcontractors are not in compliance, the State may pursue any and all remedies allowed by law, including, but not limited to: suspension of work, termination of the Contract for default, and suspension and/or debarment of the contractor. All costs necessary to verify compliance is the responsibility of the Contractor.

#### 8. Indemnification Clause

Contractor shall indemnify, defend, save and hold harmless the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees (hereinafter referred to as "Indemnatee") from and against any and all claims, actions, liabilities, damages, losses, or expenses (including court costs, attorneys' fees, and costs of claim processing, investigation and litigation) (hereinafter referred to as "Claims") for bodily injury or personal injury (including death), or loss or damage to tangible or intangible property caused, or alleged to be caused, in whole or in part, by the negligent or willful acts or omissions of Contractor or any of its owners, officers, directors, agents, employees or subcontractors. This indemnity includes any claim or amount arising out of or recovered under the Workers' Compensation Law or arising out of the failure of such contractor to conform to any federal, state or local law, statute, ordinance, rule, regulation or court decree. It is the specific intention of the parties that the Indemnatee shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the Indemnatee, be indemnified by Contractor from and against any and all claims. It is agreed that Contractor will be responsible for primary loss investigation, defense and judgment costs where this indemnification is applicable. In consideration of the award of this contract, the Contractor agrees to waive all rights of subrogation against the State of Arizona, its officers, officials, agents and employees for losses arising from the work performed by the Contractor for the State of Arizona.

*This indemnity shall not apply if the contractor or sub-contractor(s) is/are an agency, board, commission or university of the State of Arizona.*

#### 9. Insurance Requirements

Contractor and subcontractors shall procure and maintain until all of their obligations have been discharged, including any warranty periods under this Contract, are satisfied, insurance against claims for injury to persons or damage to property which may arise from or in connection with the performance of the work hereunder by the Contractor, his agents, representatives, employees or subcontractors.

The *insurance requirements* herein are minimum requirements for this Contract and in no way limit the indemnity covenants contained in this Contract. The State of Arizona in no way warrants that the minimum limits contained herein are sufficient to protect the Contractor from liabilities that might arise out of the performance of the work under this contract by the Contractor, its agents, representatives, employees or subcontractors, and Contractor is free to purchase additional insurance.

9.1. **Minimum Scope and Limits of Insurance:** Contractor shall provide coverage with limits of liability not less than those stated below.

## SPECIAL TERMS AND CONDITIONS

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#### 9.1.1. Commercial General Liability – Occurrence Form

Policy shall include bodily injury, property damage, personal injury and broad form contractual liability coverage.

- General Aggregate \$1,000,000
  - Products – Completed Operations Aggregate \$ 500,000
  - Personal and Advertising Injury \$ 500,000
  - Blanket Contractual Liability – Written and Oral \$ 500,000
  - Fire Legal Liability \$ 25,000
  - Each Occurrence \$ 500,000
- a. The policy shall be endorsed to include the following additional insured language: ***“The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor”.***
- b. Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.

#### 9.1.2. Automobile Liability

Bodily Injury and Property Damage for any owned, hired, and/or non-owned vehicles used in the performance of this Contract.

Combined Single Limit (CSL) \$500,000

- a. The policy shall be endorsed to include the following additional insured language: “The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor, involving automobiles owned, leased, hired or borrowed by the Contractor”.

#### 9.1.3. Worker's Compensation and Employers' Liability

Workers' Compensation	Statutory
Employers' Liability	
Each Accident	\$100,000
Disease – Each Employee	\$100,000
Disease – Policy Limit	\$100,000

- a. Policy shall contain a waiver of subrogation against the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.
- b. This requirement shall not apply to: Separately, EACH contractor or subcontractor exempt under A.R.S. 23-901, AND when such contractor or subcontractor executes the appropriate waiver (Sole Proprietor/Independent Contractor) form.

#### 9.2 Additional Insurance Requirements: The policies shall include, or be endorsed to include, the following provisions:

1. The State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees wherever additional insured status is required such additional insured shall be covered to the full limits of liability purchased by the Contractor, even if those limits of liability are in excess of those required by this Contract.
2. The Contractor's insurance coverage shall be primary insurance with respect to all other available sources.
3. Coverage provided by the Contractor shall not be limited to the liability assumed under the indemnification provisions of this Contract.

#### 9.3 Notice of Cancellation: Each insurance policy required by the insurance provisions of this Contract shall provide the required coverage and shall not be suspended, voided, canceled, or reduced in coverage or in limits except after

## SPECIAL TERMS AND CONDITIONS

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thirty (30) days prior written notice has been given to the State of Arizona. Such notice shall be sent directly to (State of Arizona Department Representative's Name & Address) and shall be sent by certified mail, return receipt requested.

9.4 **Acceptability of Insurers:** Insurance is to be placed with duly licensed or approved non-admitted insurers in the state of Arizona with an "A.M. Best" rating of not less than A- VII. The State of Arizona in no way warrants that the above-required minimum insurer rating is sufficient to protect the Contractor from potential insurer insolvency.

9.5 **Verification of Coverage:** Contractor shall furnish the State of Arizona with certificates of insurance (ACORD form or equivalent approved by the State of Arizona) as required by this Contract. The certificates for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf.

All certificates and endorsements are to be received and approved by the State of Arizona before work commences. Each insurance policy required by this Contract must be in effect at or prior to commencement of work under this Contract and remain in effect for the duration of the project. Failure to maintain the insurance policies as required by this Contract, or to provide evidence of renewal, is a material breach of contract.

All certificates required by this Contract shall be sent directly to (State of Arizona Department Representative's Name and Address). The State of Arizona project/contract number and project description shall be noted on the certificate of insurance. The State of Arizona reserves the right to require complete, certified copies of all insurance policies required by this Contract at any time. DO NOT SEND CERTIFICATES OF INSURANCE TO THE STATE OF ARIZONA'S RISK MANAGEMENT SECTION.

9.6 **Subcontractors:** Contractors' certificate(s) shall include all subcontractors as insureds under its policies or Contractor shall furnish to the State of Arizona separate certificates and endorsements for each subcontractor. All coverages for subcontractors shall be subject to the minimum requirements identified above.

9.7 **Approval:** Any modification or variation from the insurance requirements in this Contract shall be made by the Department of Administration, Risk Management Section, whose decision shall be final. Such action will not require a formal Contract amendment, but may be made by administrative action.

9.8 **Exceptions:** In the event the Contractor or sub-contractor(s) is/are a public entity, then the Insurance Requirements shall not apply. Such public entity shall provide a Certificate of Self-Insurance. If the contractor or sub-contractor(s) is/are a State of Arizona agency, board, commission, or university, none of the above shall apply.

## SPECIAL INSTRUCTIONS TO OFFERORS

AG08-0007

### 1. Solicitation Inquiries

Issuing Office: The AGO Contracts and Procurement Unit shall be the sole point of contact for purposes of the preparation and submittal of the Solicitation.

### 2. Additional Solicitation Submission Guide Lines

- 2.1. Late Offers: All submittals must be received by the Quotation Due Date and Time specified herein. Any response received after the Quotation Due Date and Time specified will not be considered.
- 2.2. Faxing or Mailing of Offers: It is preferred Offers be faxed to 602-542-8079. Offerors mailing Offers should allow sufficient mail delivery time to ensure timely receipt by the Issuing Office. Offers or Solicitation Amendments to Offers arriving after the due date and time will not be considered.

### 3. Familiarization of Scope of Work

Offerors should carefully review the requirements of the Solicitation and familiarize itself with the Scope of Work, laws, regulations and other factors so to satisfy itself as to the expense and difficulties of the work to be performed. There will be no subsequent financial adjustment, other than that provided by the Contract, for lack of such familiarization.

### 4. Components of a Complete Offer

- 4.1 Offer Submittal: Offers should be submitted in accordance with the directions given on Page 1 of this solicitation. Offers must be received by the Quotation Due Date and Time.
- 4.2 Offer Format: The following information should be submitted with each Offer and in this order. Failure to include all of the requested information may result in the Offer being rejected.
  - 4.2.1 Offer and Contract Award Form: Offeror should complete the top half of the Offer and Contract Award form (Attachment I). The Offer and Contract Award form from within the Solicitation should be submitted with the Offer and should include the signature of a person authorized to bind the Offeror.
  - 4.2.2 W9 Form (Attachment I): The W9 form from within the Solicitation should be completed in its entirety and submitted with the Offer.
  - 4.2.3 Narrative: The Offeror shall provide a narrative discussing the Offeror's approach to the items named in the Scope of Work and how the Offeror's approach will attain the objectives sought by the AGO.
  - 4.2.4 Contractors Experience, Expertise and Reliability: The Offeror shall demonstrate the experience, expertise and reliability to meet the requirements set forth in this Request for Quotation. The Offeror should describe how their experience and expertise makes them uniquely qualified for this project. A minimum of three references should be provided.
  - 4.2.5 Cost: Complete the price sheet (Attachment I).
  - 4.2.6 Conformance with the Request for Quotation: Offeror's signature on the Offer and Acceptance form indicates the Offeror's understanding, agreement and intent to abide by the terms, conditions and provisions of this solicitation..

### 5. Offer Opening

This is an informal Solicitation, which will not be read at a public opening; however, information submitted by the Offerors will be available for public review after an award.

## **SPECIAL INSTRUCTIONS TO OFFERORS**

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### **6. Evaluation**

Evaluation Criteria: Awards shall be made to the responsible Offeror whose Offer is determined in writing to be the most advantageous to the State based upon the evaluation criteria listed below. The evaluation criteria are listed in relative order of importance.

- 6.1.1. Narrative;
- 6.1.2. Expertise and Reliability of the Contractor;
- 6.1.3. Cost;
- 6.1.4. Conformance to the RFQ.

### **7. Discussions**

After the initial receipt and evaluation of Offers, AGO may conduct discussions with Offerors whose Offers are deemed to be reasonably susceptible to award. Notwithstanding this section, Offers should be submitted initially complete and on most favorable terms. In the event discussions are conducted, AGO shall issue a written request for Best and Final Offers. Discussions may include an in-house demonstration of the software at the AGO's facilities in Phoenix, Arizona.

### **8. Best and Final Offer**

The request for Best and Final Offer shall inform Offerors, that if they do not submit a Best and Final Offer or a notice of withdrawal, their immediate previous Offer will be considered as their Best and Final Offer. The Offeror's "immediate previous Offer" will consist of the Offeror's original proposal submission and any documents submitted by the Offeror during discussions.

### **9. Offshore Performance of Work Prohibited**

Due to security and identity protection concerns, all services under this contract shall be performed within the borders of the United States. All storage and processing of information shall be performed within the borders of the United States. This provision applies to work performed by subcontractors at all tiers. Offerors shall declare all anticipated offshore services in the proposal.

### **10. Disability Access**

Any electronic or information technology offered to the State of Arizona under this solicitation shall comply with A.R.S. § 41-2531 and § 41- 2532 and Section 508 of the Rehabilitation Act of 1973, which requires that employees and members of the public shall have access to and use of information technology that is comparable to the access and use by employees and members of the public who are not individuals with disabilities. If the offeror believes that compliance with this requirement poses an Undue Burden, the offeror shall notify the procurement officer in writing at least five days before the offer due date and time.

### **11. Offshore Performance of Work Prohibited**

Due to security and identity protection concerns, all services under this contract shall be performed within the borders of the United States. All storage and processing of information shall be performed within the borders of the United States. This provision applies to work performed by subcontractors at all tiers. Offerors shall declare all anticipated offshore services in the proposal.

### **12. Federal Immigration Laws, Compliance by State Contractors**

By signing the offer the Offeror warrants that it and all proposed subcontractors are in compliance with the federal immigration and Nationality Act ( FINA) and all other Federal immigration laws and regulations related to the immigration status of its employees. The Offeror shall obtain statements from all proposed subcontractors certifying compliance with this requirement and shall furnish the statements to the Procurement Officer upon request.



## **SPECIAL INSTRUCTIONS TO OFFERORS**

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### **13. Taxes**

The State will pay any applicable State of Arizona Transaction privilege tax and any other applicable state or local taxes on the services rendered or products supplied. No payment shall be made for any personal property taxes levied on vendor or any taxes levied on employee's wages. Applicable taxes shall be shown separately on any invoice and such sums shall be due and payable to vendor upon delivery. If claiming a tax exemption, State will provide vendor with valid tax exemption certificates. The amount of any applicable transaction privilege or use tax of a political subdivision of this state is not a factor in determining lowest bidder if a competing bidder located outside of this state is not subject to a transaction privilege or use tax of a political subdivision of this state. Taxes will not be considered as part of the evaluation process.

### **14. Definitions:**

#### **14.1. Shall, Must**

Indicates a mandatory requirement. Failure to meet these mandatory requirements may result in the rejection of a proposal as non-responsive.


#### **14.2. Should, Will**

Indicates something that is recommended but not mandatory.

#### **14.3. May**

Indicates something that is not mandatory but permissible.

**ATTACHMENT 1****AG08-0007**

	<b>OFFER AND ACCEPTANCE</b>	Office of the Attorney General Purchasing Unit 1275 West Washington Street Phoenix, Arizona 85007 (602) 542-8030														
	<b>SOLICITATION NO. AG08-0007</b>															
<b>OFFER</b>																
<b>TO THE STATE OF ARIZONA:</b> The undersigned hereby offers and agrees to furnish the material, service or construction in compliance with all terms, conditions, specifications and amendments in the Solicitation and any written exceptions in the offer. Signature also certifies understanding and compliance with paragraph one of the State of Arizona Uniform Terms and Conditions.																
<table style="width: 100%;"><tr><td style="width: 50%; vertical-align: top;"><b>General Information:</b></td><td style="width: 50%; vertical-align: top;">For clarification of this Offer Contact:</td></tr><tr><td style="border-bottom: 1px solid black;">Arizona Transaction Privilege (Sales) Tax License Number</td><td style="border-bottom: 1px solid black;">Name</td></tr><tr><td style="border-bottom: 1px solid black;">Federal Employer identification Number</td><td style="border-bottom: 1px solid black;">Telephone Number      Fax Number</td></tr><tr><td style="border-bottom: 1px solid black;">Company Name</td><td style="border-bottom: 1px solid black;">E-Mail Address</td></tr><tr><td style="border-bottom: 1px solid black;">Company Address</td><td style="border-bottom: 1px solid black;">Signature of Authorized Person      Date</td></tr><tr><td style="border-bottom: 1px solid black;">City      State      Zip Code</td><td style="border-bottom: 1px solid black;">Printed Name</td></tr><tr><td style="border-bottom: 1px solid black;">General Office Telephone Number</td><td style="border-bottom: 1px solid black;">Title</td></tr></table>			<b>General Information:</b>	For clarification of this Offer Contact:	Arizona Transaction Privilege (Sales) Tax License Number	Name	Federal Employer identification Number	Telephone Number      Fax Number	Company Name	E-Mail Address	Company Address	Signature of Authorized Person      Date	City      State      Zip Code	Printed Name	General Office Telephone Number	Title
<b>General Information:</b>	For clarification of this Offer Contact:															
Arizona Transaction Privilege (Sales) Tax License Number	Name															
Federal Employer identification Number	Telephone Number      Fax Number															
Company Name	E-Mail Address															
Company Address	Signature of Authorized Person      Date															
City      State      Zip Code	Printed Name															
General Office Telephone Number	Title															
Small business/Minority/Woman Owned Enterprise certification: Contractor [is ____] or [is not ____] a small business (less than 100 employees or has gross revenues of \$4 million or less.) Contractor [is ____] or [is not ____] a Woman Owned Business Enterprise. Contractor [is ____] or [is not ____] a Minority Owned Business Enterprise.																
<b>ACCEPTANCE OF OFFER AND CONTRACT AWARD</b> (For Arizona State Use Only)																
<p>Your offer is hereby accepted:</p> <p>The Contractor is now bound to sell the materials, services or construction listed by the attached award notice based upon the solicitation, including all terms, conditions, specifications, amendments, etc., and the Contractor's offer as accepted by the Office of the Attorney General.</p> <p>This Contract shall henceforth be referred to as Contract No. _____.</p> <p>The Contractor is hereby cautioned not to commence any billable work or provide any material, service or construction under this Contract until the Contractor receives an executed purchase order or Contract release document.</p> <div style="text-align: right; margin-top: 20px;"><p>STATE OF ARIZONA</p><p>OFFICE OF THE ATTORNEY GENERAL</p><p>Awarded this _____ day of _____, 2007</p> <p>_____ Jerry Connolly Contract Management Supervisor</p></div>																



# ATTACHMENT I

SOLICITATION NO: AG08-0007

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Arizona Office of the Attorney  
General  
1275 W Washington  
Phoenix, AZ  
85007-2926

## State of Arizona Substitute W-9 & Vendor Authorization Form



Purpose: Establish or update a vendor account with the State of Arizona. This form meets the Federal requirements to request a taxpayer identification number (TIN), request certain certifications and claims for exemption, as well as the State of Arizona requirements for vendor establishment.

Instructions: Complete form if

1. You are a U.S. person (including a resident alien);
2. You are a vendor that provides goods or services to an Arizona state agency; AND
3. You will receive payment from the State of Arizona.

Return completed form to the state agency with whom you do business, for review and authorization.

Refer to State of Arizona Substitute W-9 Instructions and IRS W-9 Instructions for details on completing this form.



<input type="radio"/> Social Security Number (SSN) _____		<input type="radio"/> OR Employer Identification Number (EIN) _____	
<b>Entity Type</b> Must select one of the following (Coding (X) is for internal purposes only)			
<input type="radio"/> Individual/Sole Proprietor or Sole Proprietor organized as LLC, PLLC (6)		<input type="radio"/> State of Arizona employee (1E) HRIS EIN _____	
<input type="radio"/> Corporation NOT providing health care, medical or legal services (5A)		<input type="radio"/> LLC, PLLC organized as corporation NOT providing health care, medical or legal services (5A)	
<input type="radio"/> Corporation providing health care, medical or legal services (5M)		<input type="radio"/> LLC, PLLC organized as corporation providing health care, medical or legal services (5M)	
<input type="radio"/> Partnership, LLP or Partnership organized as LLC or PLLC (5C)		<input type="radio"/> A state, a possession of the US, or any of their political subdivisions or instrumentalities (4G)	
<input type="radio"/> An International organization or any of its agencies/instrumentalities (5U)		<input type="radio"/> Other: Tax Reportable Entity (5P) Description _____	
<input type="radio"/> The US or any of its political subdivisions or instrumentalities (2G)		<input type="radio"/> Other: Tax Exempt Entity (5H)	
<b>Name</b> (First, Middle, Last) _____		<b>Minority Business Indicator</b> Must select one of the following (Coding (X) is for internal purposes only)	
<b>Business Name</b> _____		<input type="radio"/> Small Business (01)	
<b>Main Address</b> Where tax information and general correspondence is to be mailed		<input type="radio"/> Small Business- African American (23)	
Address _____		<input type="radio"/> Small Business- Asian (24)	
City _____ State _____ Zip code _____		<input type="radio"/> Small Business- Hispanic (25)	
<b>Remittance Address</b> Where payment is to be mailed <input type="checkbox"/> Same as Main		<input type="radio"/> Small Business- Native American (27)	
DBA/Branch/Location _____		<input type="radio"/> Small Business- Other Minority (05)	
Address _____		<input type="radio"/> Small, Woman Owned Business (06)	
City _____ State _____ Zip code _____		<input type="radio"/> Small, Woman Owned Business- African American (29)	
<b>Vendor Contact Information</b>		<input type="radio"/> Small, Woman Owned Business- Asian (30)	
Name _____		<input type="radio"/> Small, Woman Owned Business- Hispanic (31)	
Title _____ Phone # _____ Ext. _____		<input type="radio"/> Small, Woman Owned Business- Native American (33)	
Email _____ Fax _____		<input type="radio"/> Small, Woman Owned Business- Other Minority (11)	
<b>Certification</b>		<input type="radio"/> Woman Owned Business (03)	
Under Penalties of perjury, I certify that:		<input type="radio"/> Woman Owned Business- African American (17)	
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me) AND		<input type="radio"/> Woman Owned Business- Asian (18)	
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding AND		<input type="radio"/> Woman Owned Business- Hispanic (19)	
3. I am a U.S. person (including U.S. resident alien).		<input type="radio"/> Woman Owned Business- Native American (21)	
Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.		<input type="radio"/> Woman Owned Business- Other Minority (08)	
<i>The Internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup withholding.</i>		<input type="radio"/> Minority Owned Business- African American (04)	
Signature _____ Title _____ Date _____		<input type="radio"/> Minority Owned Business- Asian (32)	
		<input type="radio"/> Minority Owned Business- Hispanic (74)	
		<input type="radio"/> Minority Owned Business- Native American (15)	
		<input type="radio"/> Minority Owned Business- Other Minority (02)	
		<input type="radio"/> Non-Profit, IRC §501(c) (88)	
		<input type="radio"/> Non-Small, Non-Minority or Non-Woman Owned Business (00)	
		<input type="radio"/> Individual, Non-Business (00)	

STATE OF ARIZONA AGENCY USE ONLY


VENDOR: DO NOT WRITE BELOW THIS LINE

Agency Authorization: Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Title \_\_\_\_\_  
AGY \_\_\_\_\_ Phone # \_\_\_\_\_ Email \_\_\_\_\_ Date \_\_\_\_\_

STATE OF ARIZONA GAO USE ONLY

VENDOR & STATE AGENCY: DO NOT WRITE BELOW THIS LINE

☐ IRS TIN Matching ☐ Corporation Commission ☐ HRIS  
Vendor Number \_\_\_\_\_ Processed by \_\_\_\_\_ Date Processed \_\_\_\_\_  
GAO-W-9 Revised 05/29/07 ☐ GAO-03 ☐ Other


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1. Questionnaire

This section requests information about the contractor. Please follow the format outlined in this section when responding. You may add pages as needed.

1. Business Name, Address and Primary Phone Number:					2. Year Company was Established:	
3. Number of Personnel by Discipline: (Count each person only once, by primary function)						
	Administrative Staff		Sales Staff		Technical Staff	
	Other, Specify		Other, Specify		Other, Specify	
						<b>Total Personnel</b>


4. Company Resume/Narrative: Provide a brief synopsis of your company’s history and background.

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**2. REFERENCES**

Provide a minimum of three references to whom you have provided similar services.


<b>Company Name</b>	<b>Company Name</b>
<b>Point of Contact</b>	<b>Point of Contact</b>
<b>Telephone #</b>	<b>Telephone #</b>
<b>Street Address</b>	<b>Street Address</b>
<b>City, State and Zip Code</b>	<b>City, State and Zip Code</b>
<b>Company Name</b>	<b>Company Name</b>
<b>Point of Contact</b>	<b>Point of Contact</b>
<b>Telephone #</b>	<b>Telephone #</b>
<b>Street Address</b>	<b>Street Address</b>
<b>City, State and Zip Code</b>	<b>City, State and Zip Code</b>

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3. Qualifications and Experience of Key Personnel

Offerors should complete this form for each person or major role proposed for this project. A generic description with no name may be provided for the qualifications required fro a specific position. If an item is not applicable, indicate so by inserting “N/A”.

<b>1. Name of Individual</b>	<b>2. Title</b>
<b>3. Years of Experience</b>	<b>4. Proposed Project Role</b>
<b>5. Qualifications:</b> Describe this individual’s unique qualifications for the project described in this RFQ.	
Empty space for qualifications	

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#### 4. Price Sheet

Contractor shall provide a firm fixed cost for each item specified in table 4.1 which contains a sample of typical parts. Pricing shall be for parts on a “as needed, if needed” basis for one year.

ITEM	PART DESCRIPTION	PART #	UNIT COST “New”	UNIT COST “Remanufactured”
1	620N Jet Direct Card	J7934-69011		
2	Maintenance Kit for LJ8150N	C3914-69007		
3	Maintenance Kit LJ4200	Q2429-69005		
4	Maintenance Kit for HP 4100	C8057-69003		
5	Maintenance Kit for LJ4300	Q2436-69007		
6	Power Supply for LJ8150	C4265-69006		
7	Fuser Ass’y for LaserJet 4200	Q2425-69017		
8	Fuser Assembly for LJ8100	C4265-69008		
9	Pickup Roller for HP Color-LaserJet 4Si	RF5-0041-020CN		
10	Pick Up Assembly for a LJ4100	RG5-5084-040CN		
11	Paper Pickup Assembly for LaserJet 5 SI	C3166-69020		
12	Formatter for HP LJ8150	C4265-69001		
13	DC Controller for LaserJet 8150	C4214-69009		
14	LV Power Supply Fan for HP LJ8100/8150	RH7-1396-000CN		
15	Maintenance Kit for LJ4050	C4118-69001		
16	LJ 8000 Maintenance Kit	C3971-69002		

Table 4.1

Provide a percentage discount off list price for other HP Printer Parts \_\_\_\_\_.

The offered price shall be submitted as a percentage discount off of Manufacturer’s Suggested Retail Price (MSRP). If no MSRP exists for the manufacturer, the Offeror shall clearly state so and provide an alternative pricing scheme. If an Offeror makes a false claim that MSRP does not exist, the AGO may determine the Offeror to be non-responsive and not susceptible for award.

The price list, either on paper, electronic medium (e.g. cd), or web site should be provided with the Offeror’s response.